'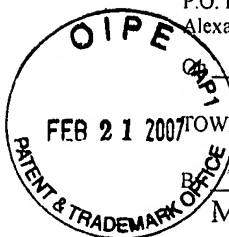I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

PATENT *IFW/*
Attorney Docket No.: 015662-002100US
Client Reference No.: DMI-28

FEBRUARY 13, 2007

FEB 2 1 2007 TOWNSEND and TOWNSEND and CREW LLP

Mark T. Davis

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

John Lim, John N. Shell, and Jenny Louie-Helm

Application No.: 10/623,481

Filed: July 18, 2003

For: DUAL DRUG DOSAGE FORMS WITH IMPROVED SEPARATION OF DRUGS

Examiner: Young, Micah Paul

Art Unit: 1618

SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT UNDER 37 CFR §1.97 and §1.98

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

The references cited on attached form PTO/SB/08A are being called to the attention of the Examiner. Copies of the references [in compliance with the requirements of 37 CFR §1.98(a)(2)] are not enclosed. It is respectfully requested that the cited references be expressly considered during the prosecution of this application, and the references be made of record therein and appear among the "references cited" on any patent to issue therefrom.

As provided for by 37 CFR §1.97(g) and (h), no inference should be made that the information and references cited are prior art merely because they are in this statement and no representation is being made that a search has been conducted or that this statement encompasses all the possible relevant information.

This IDS is being filed before the mailing date of the final Office Action or Notice of Allowance.
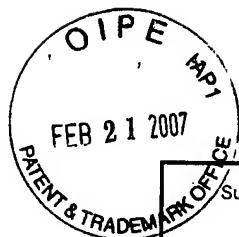
Please charge the IDS fee of $180 to Deposit Account No. 20-1430. Please deduct any additional fees from, or credit any overpayment to, the above-noted Deposit Account.

Respectfully submitted,

M. Henry Heines
Reg. No. 28,219

TOWNSEND and TOWNSEND and CREW LLP
Two Embarcadero Center, Eighth Floor
San Francisco, California 94111-3834
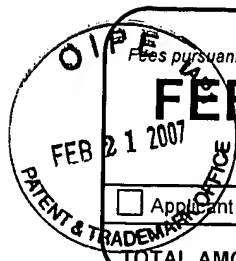Tel: 415-576-0200
Fax: 415-576-0300
MHH:mtd

60982316 v1

PTO/SB/08A (07-06)

Substitute for form 1449A&B/PTO

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(Use as many sheets as necessary)

Sheet	1	of	1

Complete if Known	
Application Number	10/623,481
Filing Date	July 18, 2003
First Named Inventor	Lim, Jong
Art Unit	1618
Examiner Name	Young, Micah Paul
Attorney Docket Number	015662-002100US

U.S. PATENT DOCUMENTS

Examiner Initials*	Cite No.[1]	Document Number — Number Kind Code[2] (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	AA	US-4,786,505	11-22-1988	Lovgren et al.	
	AB	US-4,891,230	01-02-1990	Geoghegan et al.	
	AC	US-6,159,499	12-12-2000	Seth	
	AD	US-6,248,355	06-19-2001	Seth	
	AE	US-6,780,436	08-24-2004	Lopez-Cabrera et al.	
	AF	US-6,814,979	11-09-2004	Rudnic et al.	

Examiner Signature		Date Considered	

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

[1] Applicant's unique citation designation number (optional). [2] Applicant is to place a check mark here if English language Translation is attached.

60982316 v1

	Complete if Known	
Application Number	10/623,481	
Filing Date	July 18, 2003	
First Named Inventor	Lim, Jong	
Examiner Name	Young, Micah Paul	
Art Unit	1618	
Attorney Docket No.	015662-002100US	

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL
For FY 2006

☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT	($) 180

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account   Deposit Account Number: 20-1430   Deposit Account Name: Townsend and Townsend and Crew LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, **except for the filing fee**

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17   ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
		Small Entity		Small Entity		Small Entity	
Application Type	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fee ($)**	**Fees Paid ($)**
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description		Small Entity
	Fee ($)	**Fee ($)**
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims	Extra Claims	Fee ($)	Fee Paid ($)
_____ -20 or HP = _____	x _____	= _____	

HP = highest number of total claims paid for, if greater than 20

Indep. Claims	Extra Claims	Fee ($)	Fee Paid ($)
_____ -3 or HP = _____	x _____	= _____	

HP = highest number of independent claims paid for, if greater than 3

Multiple Dependent Claims

Fee ($)	Fee Paid ($)
_____	_____

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee ($)	Fee Paid ($)
_____ - 100 = _____	/ 50 = _____	(round up to a whole number) x	_____	= _____

4. OTHER FEE(S)

	Fees Paid ($)
Non-English Specification, $130 fee (no small entity discount)	_____
Other (e.g., late filing surcharge): Submission of Information Disclosure Stmt	180

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	28,219	Telephone	415-576-0200
Name (Print/Type)	M. Henry Heines			Date	February (13), 2007

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